United Nations E/CN.9/2014/NGO/17

Economic and Social Council

Distr.: General
27 January 2014

Original: English

Commission on Population and Development
Forty-seventh session
7-11 April 2014
Item 4 of the provisional agenda*
General debate on national experience in population matters: assessment of the status of implementation of the Programme of Action of the International Conference on Population and Development

Statement submitted by Priests for Life, a non-governmental organization in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* E/CN.9/2014/1.

14-21774 (E) 300114

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Statement

The assessment of the status of implementation of the Programme of Action of the International Conference on Population and Development occurs at a critical juncture as the United Nations also evaluates the achievement of the Millennium Development Goals and works to develop sustainable development goals.

Priests for Life notes that the Programme of Action states that the discussion on population and development is where it should be: focusing on human lives. As an organization dedicated to upholding the innate dignity of all, we concur that population and development programmes must improve, and not destroy, human lives.

Priests for Life affirms the dignity and worth of every human life from conception to natural death and opposes attempts to eliminate selected groups of people, especially preborn children through abortion, and the disabled and elderly through euthanasia. Actions to reduce child and maternal mortality must be assessed for progress and greater commitments made to save lives and promote the well-being of all, from conception to natural death.

Reductions in mortality

Child mortality

The 2013 edition of the report "Levels & trends in child mortality" by the United Nations Inter-agency Group for Child Mortality Estimation notes that while the deaths of children under age 5 declined, nearly 18,000 children under 5 years of age died every day in 2012. The causes of their deaths included preventable and treatable conditions attributed to pneumonia, preterm birth complications, complications during birth, diarrhoea and malaria. Undernutrition was a factor in 45 per cent of deaths of children under 5.

Priests for Life supports efforts to provide nutritious food, clean water and sanitation for the well-being of children and mothers and advocates for access to life-saving health care, including antibiotics, treatment of HIV/AIDS, immunizations for communicable disease, prevention and treatment of malaria, treatment of pneumonia and oral rehydration for diarrhoeal disease.

Neonatal mortality

The report of the United Nations Inter-agency Group for Child Mortality Estimation also contains data that demonstrate the need for increased efforts to save the lives of newborns, stating: "The proportion of under-five deaths that occur within the first month of life (the neonatal period) has increased 19 per cent since 1990, from 37 per cent to 44 per cent, because declines in the neonatal mortality rate are slower than those in the mortality rate for older children."

The lack of progress resulted in the yearly deaths of nearly 1 million newborns in the first minute after birth, because they could not take their first breath. Birth asphyxia kills more children than malaria and nearly five times more than HIV/AIDS while complications from preterm birth are responsible for 34 per cent of neonatal deaths, the majority of them preventable.

Priests for Life urges a greater global commitment to provide for the special health needs of newborns and to save and protect the lives of all children, before

and after birth. As the Convention on the Rights of the Child reminds us, "the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth".

Abortion contributes to universal loss of life and perpetuates a dangerous mentality that devalues and destroys human life, in conflict with the emphasis in the Programme of Action on improving human lives and respecting human rights.

Maternal mortality

Progress to reduce maternal deaths has been successful over the last two decades. According to the 2012 report Trends in Maternal Mortality: 1990 to 2010, maternal deaths worldwide fell by half during that period, from 543,000 to 287,000.

The provision of health care services that respect the right to life of each and every human life is essential to continued progress in reducing both maternal and child mortality. Evidence shows that the provision of life-affirming maternal health care reduces maternal deaths.

Efforts to provide all mothers with skilled birth assistance must continue. Skilled childbirth attendants recognize obstetric emergencies and help women receive critical emergency care and treatment. Complications from childbirth, including severe bleeding, the number one cause of maternal death, must continue to be treated and prevented while mothers receive essential transfusions of clean blood. Increased access to prenatal care, including adequate nutrition and vitamins, will save the lives of both mothers and children.

Women's health and lives continue to be jeopardized by a lack of access to health care for the prevention and treatment of disease, including malaria, HIV/AIDS, hepatitis, anaemia, malaria, cardiovascular disease, tuberculosis, epilepsy and diabetes, all factors that increase the risk of maternal death.

Priests for Life believes that abortion is not a part of legitimate maternal or reproductive health care. Abortion ends the life of one patient and may cause physical, mental, emotional or spiritual injury to the woman. Post-abortive women around the world speak with regret of their abortion through our "Silent no more" awareness campaign and many others globally seek healing through the retreats offered by our Rachel's Vineyard ministry. Programmes that include access to abortion treat women's unique reproductive capabilities as a problem rather than recognizing and assisting the universally valued role of mother.

Nutrition during the first 1,000 days of life

The provision of nutrition demands attention and assessment. Malnutrition is the underlying cause of death of at least 3.1 million children a year. More than 800,000 babies, one in four newborns, die each year because they are born too soon or too small as a result of poor maternal nutrition.

It is increasingly recognized that adequate nutrition during the first 1,000 days of life, from conception to the second birthday, saves the lives of women and children and improves the prosperity of a country. An incisive series of reports published in 2008 by the *Lancet*, Maternal and Child Nutrition, issues an urgent plea to Governments to make nutrition during the first 1,000 days of life, and for all women of childbearing age, the centre of the new development goals.

As stated in one of the follow-up reports, "Maternal and child nutrition: building momentum for impact", published in 2013 in the *Lancet*, "the new

evidence provided in the Maternal and Child Nutrition Series strengthens the case for a continued focus on the first 1,000 days. Investments within this window can help meet crucial goals: the prevention of undernutrition, overweight, and poor child development outcomes with long-lasting effects on human capital formation".

Another of the follow-up reports, "Only collective action will end undernutrition", emphasizes the importance of preparing adolescents and women of reproductive age for pregnancy and placing this urgent need at the centre of the post-2015 agenda.

We are in a race against time to eradicate the global scourge of undernutrition. Undernutrition cripples global economic growth and development, and future global prosperity and security are intimately linked with our ability to respond adequately to this urgent challenge. It stunts the physical growth and life chances of millions of people. Estimates suggest that up to 11 per cent of national economic productivity in Africa and Asia is lost to undernutrition.

Women and girls are at the heart of this message. As the bearers and caregivers of children, their health and economic potential is entwined with that of future generations. Unless girls grow well in early childhood and adolescence and enter into motherhood well nourished, are lent support during pregnancy, protected from heavy physical labour and empowered to breastfeed and provide good food for their babies and toddlers, the intergenerational cycle of undernutrition will not be broken.

If women of childbearing age are well nourished, they are healthier and able to provide nourishment for the child in the womb, and up to age two, to ensure healthy physical and cognitive development. Healthy children thrive and are empowered to become healthy adults who are better equipped to make meaningful contributions to their families, society and country.

Conclusion

While there has been measurable success in reducing child and maternal mortality rates in some countries and regions, a greater global commitment is needed to further reduce child and maternal mortality and to reduce neonatal mortality.

The elimination of malnutrition during the first 1,000 days of life and for adolescent girls and all women of childbearing age will not only save the lives of women and children and contribute to their well-being, but will improve the economic potential of countries. It ought to be at the centre of development policies.

The intrinsic dignity of life is the foundation of human rights and extends to all members of the human family, including preborn children, who are the future of all countries, especially those struggling with the effects of low fertility. Attempts to inject a pro-abortion ideology into negotiated documents block consensus and impede progress. Many countries oppose abortion and view the child in the womb as a precious member of the human family. According to data from the wall chart World Abortion Policies 2013, issued by the Population Division of the Department of Economic and Social Affairs, many more countries ban or restrict abortion than allow abortion upon request.

Abortion destroys lives and ought not to be promoted in policies and programmes on population and development, which should focus on human lives and recognize the potential of all individuals; no one should be treated as expendable.